REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA)							
1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one):							
(a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT							
(b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY							
(c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY							
2. MY INFORMATION (Required)							
a. TYPED OR PRINTED NAME (Last, First, Middle)			SUFFIX (Jr., Sr., III, etc.)				
			2				
c. SEX d. RACE e. DATE OF BIRTH (MMDDYYYY)	f. SOCIAL SE	CURITY NUMBER	g. STATE DR	g. STATE DRIVER'S LICENSE OR I.D. NUMBER			
h. TELEPHONE NUMBER (No DSN number; include all in	ternational prefix	es) i. FAX NU	JMBER (No DSN numi	ber; include all in	ternational prefixe	s)	
j. EMAIL ADDRESS							
3. MY VOTING RESIDENCE ADDRESS (Required	(Military, use le	egal residence. Ove	rseas citizens, use las	t legal residence	in U.S.)		
a. NUMBER AND STREET (Cannot be a P.O. Box)							
b. CITY, TOWN OR VILLAGE	C.	COUNTY		d. STATE	e. ZIP CODE		
						_	
4. WHERE TO SEND MY VOTING MATERIALS							
a. MY CURRENT ADDRESS (Where I live now) (Require	d)		RWARDING ADDRES		lete 4b. only if you	do not want your	
		banot n	anca to the address m	Biodit raly			
				, , , , , , , , , , , , , , , , , , ,			
c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS	PERMITTED BY	MY STATE, BY:	MAIL	FAX		EMAIL	
entre la la companya de la companya		AL.	to				
<ol><li>MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections):</li></ol>							
<ol> <li>ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots - see instructions for Block 6, paragraph (3).         Consult the Voting Assistance Guide for other specific state instructions.)     </li> </ol>							
Consult the voting Assistance Guide for other sp	come state mot	ruotione.)					
7. AFFIRMATION (Required)							
I swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S.							
citizen temporarily residing outside the U.S., of	or other U.S. cit	izen residing outs	ide the U.S., and				
<ol> <li>I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and</li> <li>I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have</li> </ol>							
been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and							
<ol><li>My signature and date below indicate when I completed this document, and</li></ol>							
<ol> <li>The information on this form is true and complete to the best of my knowledge.</li> <li>I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.</li> </ol>							
Signed: Da	ite:	Sign	ed.		Date:		
Signed: Da	(MMDD		(Witness/Notary and	d Address (if req		(MMDDYYYY)	